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### United States Bankruptcy Court of the

#### Northern District Of Illinois Western Division

Trustee's Final Report

In Re: THOMAS E. LINDSAY & KIMBERLY R. LINDSAY

Case Number: 05-74436 SSN-xxx-xx-0615 & xxx-xx-0945

515 E. NORTH STREET DURAND, IL 61024

Case filed on: 8/30/2005

Plan Confirmed on:

3/3/2005

D Dismissed

Total funds received and disbursed pursuant to the plan: \$2,070.00

Detail of Disbursements below:

Claim # 772	Name of the Claimant CLERK OF U.S. BANKRUPTCY COURT Total Administration	Claimed by the Creditor 164.00 164.00	Allowed by the Court 164.00 164.00	Principal Paid 164.00 164.00	Interest Paid 0.00 0.00
000	BALSLEY & DAHLBERG LLP	1,200.00	1,200.00	1,084.17	0.00
	Total Legal	1,200.00	1,200.00	1,084.17	0.00
026 210	AMERICREDIT PREMIER BANKCARD Total Legal	0.00 0.00 0.00	0.00 0.00 0.00	0.00 0.00 0.00	0.00 0.00 0.00
029 998	THOMAS E. LINDSAY THOMAS E. LINDSAY Total Debtor Refund	0.00 0.00 0.00	0.00 0.00 0.00	0.00 0.00 0.00	0.00 0.00 0.00
001	ALLIANCE ONE, INC.	0.00	0.00	0.00	0.00
002	AMCORE BANK NA	0.00	0.00	0.00	0.00
003	VENGROFF WILLIAMS & ASSOCIATES	0.00	0.00	0.00	0.00
004	CAPITAL ONE CCA / CREDITPAC CERTEGY PAYMENT RECOVERY SERVICES COLUMBIA HOUSE	555.74	555.74	19.90	0.00
005		0.00	0.00	0.00	0.00
006		0.00	0.00	0.00	0.00
007		0.00	0.00	0.00	0.00
008	COMED CO	0.00	0.00	0.00	0.00
009	CREDIT BUREAU CENTRE	0.00	0.00	0.00	0.00
010	PREMIER BANKCARD/CHARTER	361.67	361.67	0.00	0.00
011	HANDYMAN CLUB OF AMERICA HOME CARE PHARMACY ILLINOIS STATE TOLLWAY AUTHORITY MEDIACOM	0.00	0.00	0.00	0.00
012		0.00	0.00	0.00	0.00
013		0.00	0.00	0.00	0.00
014		0.00	0.00	0.00	0.00
015	MUTUAL MANAGEMENT SERVICES	0.00	0.00	0.00	0.00
016	NCO FINANCIAL SYSTEMS	0.00	0.00	0.00	0.00
017	NICOR GAS	918.59	918.59	32.88	0.00
018	PRIME THERAPEUTICS LVNV FUNDING LLC READER'S DIGEST ROCKFORD MERCANTILE AGENCY INC	0.00	0.00	0.00	0.00
019		1,347.47	1,347.47	48.24	0.00
020		0.00	0.00	0.00	0.00
021		158.80	158.80	0.00	0.00
022	ROCKFORD REGISTER STAR	0.00	0.00	0.00	0.00
023	SOUTHERN WISCONSIN ORAL SURGERY	0.00	0.00	0.00	0.00
024	STATE BANK OF DAVIS	0.00	0.00	0.00	0.00
025 027 028	AFNI/VERIZON AMERICREDIT AFNI/VERIZON Total Unsecured	278.56 15,067.50 1,549.03 20,237.36	278.56 15,067.50 1,549.03 20,237.36	0.00 539.45 55.46 695.93	0.00 0.00 0.00 0.00
	Grand Total:	21,601.36	21,601.36	1,944.10	0.00

Total Paid Claimant: \$1,944.10
Trustee Allowance: \$125.90
Percent Paid Unsecured: 3.44

Wherefore, your petitioner prays that a final Decree be entered discharging the trustee and the trustee's surety from any and all liablility on account of the within proceedings, and closing the estate, and for such other relief as is just. Pursuant to FRBP, I hereby certify that the subject case has been fully administered.

Report Dated:

/s/ Lydia S. Meyer

Lydia S. Meyer, Trustee

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## **Northern District Of Illinois**

**Western Division** 

This is to certify that a copy of this notice has been mailed to the debtor and the debtor's attorney.

Dated at Rockford, IL on 09/27/2007

By /s/Heather M. Fagan